

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Restoration PAC

ADDRESS (number and street)

1901 Butterfield Road

Ste. 120

Check if different  
than previously  
reported. (ACC)

Downers Grove

IL

60515

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00571588

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

01 05 2020

in the  
State of

GA

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y

11 24 2020

through

M M / D D / Y Y Y Y Y Y

12 16 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Gaskill, Sherry, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Gaskill, Sherry, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 22 2020

M M / D D / Y Y Y Y Y Y

12 22 2020

M M / D D / Y Y Y Y Y Y

12 22 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Restoration PAC

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		<input type="text" value="995542.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2375979.45"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2999.80"/>	<input type="text" value="22488467.40"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2378979.25"/>	<input type="text" value="23484009.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="544231.68"/>	<input type="text" value="21649261.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1834747.57"/>	<input type="text" value="1834747.57"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**Restoration PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
11		24		2020

To:

M M	/	D D	/	Y Y Y Y
12		16		2020

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1695.00

22444192.37

(ii) Unitemized .....

1304.35

44235.43

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

2999.35

22488427.80

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

2999.35

22488427.80

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.45

39.60

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

2999.80

22488467.40

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

2999.80

22488467.40

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	- 384902.22	1077252.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	- 384902.22	1077252.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500000.00	1900000.00
24. Independent Expenditures (use Schedule E) .....	429063.90	18484171.84
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	70.00	337.15
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	70.00	337.15
29. Other Disbursements (Including Non-Federal Donations).....	0.00	187500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	544231.68	21649261.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	544231.68	21649261.95

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2999.35	22488427.80
34. Total Contribution Refunds (from Line 28(d)) .....	70.00	337.15
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2929.35	22488090.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	- 384902.22	1077252.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.45	39.60
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	- 384902.67	1077213.36

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Restoration PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Bottner, Randy, , ,**

Mailing Address 4 Adams Point Cross

City  
Savannah

State  
GA

Zip Code  
31411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-employed

Occupation (for Individual)

MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 12 / 2020

**Transaction ID : SA11Al.16404**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Bowman Jr., Vernon L., , ,**

Mailing Address P.O. Box 386

City  
Aledo

State  
TX

Zip Code  
76008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 02 / 2020

**Transaction ID : SA11Al.16339**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Goodyear, Priscilla, , ,**

Mailing Address 10042 Signet Circle

City  
Huntington Beach

State  
CA

Zip Code  
92646

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 07 / 2020

**Transaction ID : SA11Al.16374**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Restoration PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Remaley, R. David, , ,**

Mailing Address 1570 Old Alabama Rd  
#102

City  
Roswell

State  
GA

Zip Code  
30076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Roswell Dental Care

Occupation (for Individual)  
Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 08 / 2020

**Transaction ID : SA11Al.16425**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Santucci, Vincent, , ,**

Mailing Address 5530 N. Redwood Drive

City

Norwood Park Township

State

IL

Zip Code

60656

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Sanofi

Occupation (for Individual)  
Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 05 / 2020

**Transaction ID : SA11Al.16355**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Smith, Sheila, , ,**

Mailing Address 34620 Clayton Road

City

Dade City

State

FL

Zip Code

33523

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 27 / 2020

**Transaction ID : SA11Al.16329**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

595.00

1695.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 20

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

## **A. Campfire Communications, LLC**

Mailing Address P.O. Box 188  
151 Summer Street

City  
Morrison

State  
CO

Zip Code  
80465

Purpose of Disbursement  
Communications consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 16 / 2020

FEC Identification Number

C

Transaction ID : SB21B.16430

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Harris Media, LLC**

Mailing Address 6500 Manor Drive

City  
Austin

State  
TX

Zip Code  
78723

Purpose of Disbursement  
Digital advertising (IE paid 11/19/20, see schedule E)

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 24 / 2020

FEC Identification Number

C

Transaction ID : SB21B.13966

Amount of Each Disbursement this Period

- 420000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Harris Media, LLC**

Mailing Address 6500 Manor Drive

City  
Austin

State  
TX

Zip Code  
78723

Purpose of Disbursement  
Design consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2020

FEC Identification Number

C

Transaction ID : SB21B.16431

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

- 407500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Restoration PAC**

Full Name (Last, First, Middle Initial)

**A. Harris Media, LLC**

Mailing Address 6500 Manor Drive

City  
AustinState  
TXZip Code  
78723Purpose of Disbursement  
Fundraising consulting

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2020					

FEC Identification Number

C

Transaction ID : SB21B.16432

Amount of Each Disbursement this Period

1016.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Harris Media, LLC**

Mailing Address 6500 Manor Drive

City  
AustinState  
TXZip Code  
78723Purpose of Disbursement  
Design consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				16				2020					

FEC Identification Number

C

Transaction ID : SB21B.16433

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Harris Media, LLC**

Mailing Address 6500 Manor Drive

City  
AustinState  
TXZip Code  
78723Purpose of Disbursement  
Fundraising consulting

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				16				2020					

FEC Identification Number

C

Transaction ID : SB21B.16434

Amount of Each Disbursement this Period

1975.18

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10491.76

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Restoration PAC**

Full Name (Last, First, Middle Initial)

**A. LexisNexis**

Mailing Address 28544 Network Place

City  
ChicagoState  
ILZip Code  
60673Purpose of Disbursement  
Research services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	4			2	0	2	0		

FEC Identification Number

C

Transaction ID : SB21B.16435

Amount of Each Disbursement this Period

983.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**Mailing Address 185 Berry Street  
Suite 550City  
San FranciscoState  
CAZip Code  
94107Purpose of Disbursement  
Online fundraising fees

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	4			2	0	2	0		

FEC Identification Number

C

Transaction ID : SB21B.16443

Amount of Each Disbursement this Period

56.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe, Inc.**Mailing Address 185 Berry Street  
Suite 550City  
San FranciscoState  
CAZip Code  
94107Purpose of Disbursement  
Online fundraising fees

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			3	0			2	0	2	0		

FEC Identification Number

C

Transaction ID : SB21B.16444

Amount of Each Disbursement this Period

82.49

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1122.40

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Restoration PAC**

Full Name (Last, First, Middle Initial)

**A. Stripe, Inc.**Mailing Address 185 Berry Street  
Suite 550City  
San FranciscoState  
CAZip Code  
94107Purpose of Disbursement  
Online fundraising fees

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				07				2020					

FEC Identification Number

C

Transaction ID : SB21B.16446

Amount of Each Disbursement this Period

12.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe, Inc.**Mailing Address 185 Berry Street  
Suite 550City  
San FranciscoState  
CAZip Code  
94107Purpose of Disbursement  
Online fundraising fees

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				14				2020					

FEC Identification Number

C

Transaction ID : SB21B.16447

Amount of Each Disbursement this Period

54.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Veralith, Inc.**

Mailing Address 800 West Fifth Ave.

City  
NapervilleState  
ILZip Code  
60563Purpose of Disbursement  
Website content (production cost)

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				16				2020					

FEC Identification Number

C

Transaction ID : SB21B.16448

Amount of Each Disbursement this Period

10495.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10561.34

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

**A. Veralith, Inc.**

Mailing Address 800 West Fifth Ave.

City  
NapervilleState  
ILZip Code  
60563Purpose of Disbursement  
Podcast equipment

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			16			2020					

FEC Identification Number

C

Transaction ID : SB21B.16449

Amount of Each Disbursement this Period

418.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

418.99

**TOTAL** This Period (last page this line number only).....▶

- 384905.51

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

**A. AMERICAN PRINCIPLES PROJECT PAC**

Mailing Address 2800 SHIRLINGTON ROAD, STE. 1201

City  
ARLINGTONState  
VAZip Code  
22206Purpose of Disbursement  
Contribution expense

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☐ General  
☒ Other (specify) ▼

Runoff

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	4			2	0	2	0		

FEC Identification Number

C C00544387

Transaction ID : SB23.16429

Amount of Each Disbursement this Period

500000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

500000.00

TOTAL This Period (last page this line number only).....▶

500000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 14 OF 20

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Restoration PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Reed Media Partners, LLC

Nature of Debt (Purpose):

Estimate for television advertising (production cost) reported on 10/28 Schedule E

Mailing Address 1320 N. Courthouse Rd., Ste. 130

City  
ArlingtonState  
VAZip Code  
22201

Outstanding Balance Beginning This Period

8000.00

Transaction ID : SD10.16305

Amount Incurred This Period

0.00

Payment This Period

8000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 15 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Restoration PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00571588</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Harris Media, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 24 / 2020</span> </div>	
Mailing Address <b>6500 Manor Drive</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">4150.00</span> </div>	
City <b>Austin</b>	State <b>TX</b>	Zip Code <b>78723</b>		
Purpose of Expenditure Digital advertising (production cost) - see Schedule B		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.13967</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>	
Name of Federal Candidate: <span style="float: right;"><input type="checkbox"/> Support</span> <b>WARNOCK, RAPHAEL, ,</b> <span style="float: right;"><input checked="" type="checkbox"/> Oppose</span>			Office Sought: <span style="float: right;"><input type="checkbox"/> House</span> District: <u>00</u> <span style="float: right;"><input type="checkbox"/> President</span> <span style="float: right;"><input checked="" type="checkbox"/> Senate</span> State: <u>GA</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="float: right; border: 1px solid black; padding: 2px;">4150.00</span>			Disbursement For: <span style="float: right;"><input type="checkbox"/> Primary</span> <span style="float: right;"><input type="checkbox"/> General</span> 2020 <span style="float: right;"><input checked="" type="checkbox"/> Other (specify) ▶</span> <span style="float: right;">Runoff</span>	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Harris Media, LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 24 / 2020</span> </div>	
Mailing Address <b>6500 Manor Drive</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">4150.00</span> </div>	
City <b>Austin</b>	State <b>TX</b>	Zip Code <b>78723</b>		
Purpose of Expenditure Digital advertising (production cost) - see Schedule B		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.13969</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>	
Name of Federal Candidate: <span style="float: right;"><input type="checkbox"/> Support</span> <b>OSSOFF, T. JONATHAN, ,</b> <span style="float: right;"><input checked="" type="checkbox"/> Oppose</span>			Office Sought: <span style="float: right;"><input type="checkbox"/> House</span> District: <u>00</u> <span style="float: right;"><input type="checkbox"/> President</span> <span style="float: right;"><input checked="" type="checkbox"/> Senate</span> State: <u>GA</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="float: right; border: 1px solid black; padding: 2px;">8300.00</span>			Disbursement For: <span style="float: right;"><input type="checkbox"/> Primary</span> <span style="float: right;"><input type="checkbox"/> General</span> 2020 <span style="float: right;"><input checked="" type="checkbox"/> Other (specify) ▶</span> <span style="float: right;">Runoff</span>	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	8300.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Gaskill, Sherry, ,*
*[Electronically Filed]*

Date

M M / D D / Y Y Y Y Y Y

12 / 22 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 16 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Restoration PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571588		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>		
Full Name of Payee <b>Harris Media, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 24 / 2020		
Mailing Address 6500 Manor Drive			Amount <span style="border: 1px solid black; padding: 2px;">4150.00</span>		
City Austin	State TX	Zip Code 78723	Transaction ID : <b>SE.13971</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>		
Purpose of Expenditure Digital advertising (production cost) - see Schedule B		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: LOEFFLER, KELLY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">12450.00</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee <b>Harris Media, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 24 / 2020		
Mailing Address 6500 Manor Drive			Amount <span style="border: 1px solid black; padding: 2px;">4150.00</span>		
City Austin	State TX	Zip Code 78723	Transaction ID : <b>SE.13973</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>		
Purpose of Expenditure Digital advertising (production cost) - see Schedule B		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: PERDUE, DAVID, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">16600.00</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">8300.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gaskill, Sherry, , ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 22 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 17 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Restoration PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571588	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Harris Media, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 24 / 2020		
Mailing Address 6500 Manor Drive			Amount <span style="border: 1px solid black; padding: 2px;">151175.00</span>		
City Austin		State TX	Zip Code 78723		Transaction ID : <b>SE.13975</b>
Purpose of Expenditure Digital advertising (placement cost) - see Schedule B			Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>
Name of Federal Candidate: WARNOCK, RAPHAEL, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: GA <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">167775.00</span> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee <b>Harris Media, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 24 / 2020		
Mailing Address 6500 Manor Drive			Amount <span style="border: 1px solid black; padding: 2px;">50525.00</span>		
City Austin		State TX	Zip Code 78723		Transaction ID : <b>SE.13976</b>
Purpose of Expenditure Digital advertising (placement cost) - see Schedule B			Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>
Name of Federal Candidate: OSSOFF, T. JONATHAN, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: GA <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">218300.00</span> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">201700.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gaskill, Sherry, ,</i>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 22 / 2020		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 18 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Restoration PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571588	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div>M M</div> / <div>D D</div> / <div>Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <b>Harris Media, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 6500 Manor Drive			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div>M M</div> / <div>D D</div> / <div>Y Y Y Y Y Y</div></div> </div>		
City Austin		State TX	Zip Code 78723		
Purpose of Expenditure Digital advertising (placement cost) - see Schedule B			Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>		
Name of Federal Candidate: LOEFFLER, KELLY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: 00 State: GA		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">319150.00</div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
Full Name of Payee <b>Harris Media, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 6500 Manor Drive			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div>M M</div> / <div>D D</div> / <div>Y Y Y Y Y Y</div></div> </div>		
City Austin		State TX	Zip Code 78723		
Purpose of Expenditure Digital advertising (placement cost) - see Schedule B			Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>		
Name of Federal Candidate: PERDUE, DAVID, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: 00 State: GA		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">420000.00</div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">201700.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) TOTAL Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Gaskill, Sherry, , ,</i>		[Electronically Filed]		Date	
				<div style="display: flex; justify-content: space-between;"> <div><div>M M</div> / <div>D D</div> / <div>Y Y Y Y Y Y</div></div> </div>	
				<div style="display: flex; justify-content: space-between;"> <div><div>M M</div> / <div>D D</div> / <div>Y Y Y Y Y Y</div></div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 19 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Restoration PAC</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00571588         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>Reed Media Partners, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 28 / 2020	
Mailing Address 1320 N. Courthouse Rd., Ste. 130			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4000.00</div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : SE.16436</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 16 / 2020	
Purpose of Expenditure Television advertising (actual production cost - est. on 10/28/20 24-hr report)		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16403756.43</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Reed Media Partners, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 28 / 2020	
Mailing Address 1320 N. Courthouse Rd., Ste. 130			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4000.00</div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : SE.16437</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 16 / 2020	
Purpose of Expenditure Television advertising (actual production cost - est. on 10/28/20 24-hr report)		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: TRUMP, DONALD J., , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16403756.43</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Gaskill, Sherry, , ,</u>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 22 / 2020		<b>[Electronically Filed]</b>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 20 OF 20  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Restoration PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571588	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Reed Media Partners, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 28 / 2020	
Mailing Address 1320 N. Courthouse Rd., Ste. 130			Amount <span style="border: 1px solid black; padding: 2px;">531.95</span>	
City Arlington	State VA	Zip Code 22201	Transaction ID : <b>SE.16438</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 16 / 2020	
Purpose of Expenditure Television advertising (actual production cost - est. on 10/28/20 24-hr report)		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16404288.38</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Reed Media Partners, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 28 / 2020	
Mailing Address 1320 N. Courthouse Rd., Ste. 130			Amount <span style="border: 1px solid black; padding: 2px;">531.95</span>	
City Arlington	State VA	Zip Code 22201	Transaction ID : <b>SE.16440</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 16 / 2020	
Purpose of Expenditure Television advertising (actual production cost - est. on 10/28/20 24-hr report)		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: TRUMP, DONALD J., , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16404820.33</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">1063.90</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">429063.90</span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>Gaskill, Sherry, , ,</i>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 22 / 2020	
[Electronically Filed]				